

STATE OF MAINE CHEMICAL INVENTORY REPORTING FORM

GENERAL INFORMATION

Submission of this Chemical Inventory Reporting Form is required by The Emergency Planning and Community Right-to-Know Act (EPCRA), a part of Title III of the Superfund Amendments and Reauthorization Act of 1986, Public Law 99-499 and Title 37-B, M.R.S.A, Chapter 13, Public Law 464. The purpose of the Chemical Inventory Reporting Form is to provide State and local officials and the public with specific information on hazardous materials present at your facility during the past calendar year.

YOU MUST PROVIDE ALL INFORMATION REQUESTED ON THIS FORM TO FULFILL STATE and FEDERAL REPORTING REQUIREMENTS. THIS FORM SUPERSEDES FEDERAL TIER I and TIER II REPORTING FORMS and HAS BEEN ACCEPTED BY U.S. EPA, REGION I.

WHO MUST SUBMIT THIS FORM

All facilities in the State of Maine must report those hazardous chemicals and/or extremely hazardous substances that were present at the facility at any time during the preceding calendar year at or above established threshold planning quantities.

WHERE IT MUST BE SENT

This form must be submitted to the State Emergency Response Commission (SERC) via the Maine Emergency Management Agency, your appropriate local emergency planning committee (LEPC) via your county Emergency Management Agency, and the fire department with jurisdiction over your facility. Send all fees required to the Maine Department of Defense, Veterans and Emergency Management, ATTN: SERC/MEMA, 104 State House Station, Augusta, Maine 04333-0104.

WHAT CHEMICALS ARE INCLUDED

The U.S. EPA has established threshold quantities for extremely hazardous substances (those specified under Sec. 302 of EPCRA) and hazardous chemicals.

For *extremely hazardous substances*, the amount is 500 pounds or the established threshold planning quantity, whichever is lower. For a list of Sec. 302 chemicals and their threshold planning quantities, consult the List of Lists published by the EPA. Free copies are available by calling Rayna Leibowitz, 1-800-452-8735.

Hazardous chemical means any such substance as defined under the OSHA Hazard Communication Standard generally identified as chemical substances whose Material Safety Data Sheet shows adverse health effects if exposure occurs.

The following exceptions apply:

- (1) Any food, food additive, color additive, drug, or cosmetic regulated by the Food and Drug Administration.
- (2) Any substance present as a solid in any manufactured item to the extent exposure to the substance does not occur under normal condition of use.
- (3) Any substance to the extent it is used for personal, family, or household purposes, or is present in the same form and concentration as a product packaged for distribution and use by the general public.
- (4) Any substance to the extent is used in a research laboratory or a hospital or other medical facility under the direct supervision of a technically qualified individual.
- (5) Any substance to the extent is used in routine agricultural operation or is a fertilizer held for sale by a retailer to the ultimate customer.

The threshold planning quantity for hazardous chemicals is 10,000 pounds.

REPORTING FEES

Public Law 464 authorized the Maine Emergency Management Agency, with the advice of the State Emergency Response Commission, to promulgate rules that would establish reporting fees for chemical inventories in the State of Maine. In August of 1989, rules were established that require a fee based on the average daily amount for the chemical you are reporting on this inventory form. Please consult the pink reporting fee worksheet to determine the amount you should pay. If you did not receive one, contact the address on page 5.

Fees and the appropriate fee worksheets must be sent to:

Department of Defense, Veterans and
Emergency Management
ATTN: SERC/MEMA
104 State House Station
Augusta, Maine 04333-0104

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Please read these instructions carefully. Print or type all responses. Examples follow in most sections.

REPORTING PERIOD

Enter the appropriate calendar year for which you are reporting, beginning January 1 and ending December 31. You should be reporting on inventories stored at your facility during the previous calendar year.

SECTION 1: FACILITY DATA

You must indicate whether your report is for the facility as a whole or for an establishment within the facility. Check the first box if the report contains information about a chemical for an entire facility. Check the second box if the report contains information about a chemical for a particular establishment within a facility.

Enter the full **name** and physical **location** of your facility, by municipality and street or road and street number. If your facility is on a designated highway route, please put the number of the route as well as the local name of the street or road.

Enter the **mailing address** of your facility, including city, state, and zip code, and telephone number, including area code. **If you wish Title III requests for information to go through your main or home office, list that address here.**

Enter the name, title, and work phone number of at least one local person or office who can be an **emergency contact** if emergency responders need assistance in responding to a chemical accident at the facility. Provide an emergency phone number where chemical and facility information would be available 24 hours a day, every day.

Enter the **owner/operator's name**, the mailing address of the owner/operator and telephone number. Specify the **type** of number: H - Home, W - Work, P - Pager or A - Answering Service.

Please supply your primary **Standard Industrial Classification** (SIC) Code (used on reports to the Department of Labor) or the North American Industry Classification System Code and the Dun & Bradstreet number of your facility, if you have one. The financial officer of your facility should be able to provide the Dun & Bradstreet number.

Enter the **latitude and longitude** of your facility if you have not provided a street address.

Insert the average number of **full time or full time equivalent (FTE)** positions at your facility. Example: 12 full time positions and 4 half time positions equals 14 FTE positions

SECTION 2: CHEMICAL IDENTIFICATION

If you are withholding the name of the chemical as a **trade secret** in accordance with criteria specified in Title III, Sec. 322, check the box at the top of Section 2 and contact U.S. EPA for further information and instructions.

Enter the **chemical name** or common name of the hazardous material. Identify whether you have already provided an MSDS or one is immediately available upon request. If the chemical is in a mixture, please provide its packaged brand name(s) or shelf name(s).

WHAT ABOUT MIXTURES?

If a chemical is a **mixture**, you should report each extremely hazardous substance at a concentration greater than one percent by weight *within the mixture*.

Place a check in the box of all applicable descriptors: pure or in a mixture, **and** physical state; solid, liquid, and/or gas.

EXAMPLE

You are a pesticide dealer that keeps large quantities of Gramoxone on hand. The active ingredient in Gramoxone is paraquat, an extremely hazardous substance. In reporting the chemical name you would write "PARAQUAT" and check the boxes marked "MIX" and "LIQUID". The packaged brand name is "GRAMOXONE".

Enter the **Chemical Abstract Service (CAS) number** of the chemical and the **RTEC** number if it is available to you on the Material Safety Data Sheet. Please provide the 4-digit number found either following **UN** or **NA** on shipping labels or listed as the DOT I.D. number. Give the primary **DOT hazard class** into which this chemical falls

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and check all EPA physical and health **hazard categories** that apply.

Refer to the EPA Title III List of Lists available from the address on page 5. If the chemical has a number in the 302 (EHS) column it *is* an **extremely hazardous substance** and the **Yes** box should be checked. If the chemical is not on the list or there is no number in this column check the **No** box.

SECTION 3: STORAGE DATA

This section of the Chemical Inventory Reporting Form requires specific information on **the amounts at separate locations within the same facility that the same hazardous material is stored**. Three (3) location sections have been provided on the form. If you store the hazardous chemical in more than three locations at your facility, please attach additional sheets providing the same information for each location.

If you have included a **map** of your facility depicting the location of the hazardous material, please check the box where indicated.

WHAT UNITS DO I USE?

All amounts should be reported in **pounds**. The Threshold Planning Quantities (TPQ) of hazardous materials are listed in pounds, therefore it is essential you convert your quantity of chemical to pounds to determine if you have an amount that falls at or above the TPQ. To convert gas or liquid volume to weight in pounds, multiply the amount by either the specific gravity or density.

For the **Maximum Amount Present**, enter the maximum quantity that was present at the storage or processing location on any given day during the previous calendar year.

Enter the **Average Daily Amount in Storage**, in pounds, that was present at your facility during the year.

If the chemical at that location is stored in multiple vessels, enter the **maximum amount**, in pounds, that is contained in one **single vessel**. If several vessels are connected through ducts or pipes, **consider all connected units as one single vessel**.

Provide a brief **description** of the precise **storage location** of the chemical, so that emergency responders can locate it easily. You may reference locations on an enclosed facility map if you wish.

Please enter the **number of days** that the hazardous material was on-site in that location at your facility.

Indicate the **type and condition** of storage present at the location from the corresponding codes in the table on page 4. Find that storage type for the reported location and enter the letter in the first box. Next, enter the applicable pressure and temperature code for that storage type in the next two (2) boxes, respectively.

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EXAMPLE

Your facility began to keep reportable inventories of formic acid on July 1 of this calendar year. The formic acid is stored in a tank inside the building at ambient pressure and temperature conditions. For Days on Site, you would enter **184**. For Storage Code, you would enter **C-1-4**.

CODES	Types of Storage
A	Above ground tank
B	Below ground tank
C	Tank inside building
D	Steel drum
E	Plastic or non-metallic drum
F	Can
G	Carboy
H	Silo
I	Fiber drum
J	Bag
K	Box
L	Cylinder
M	Glass bottle or jug
N	Plastic bottle or jug
O	Tote bin
P	Box car
Q	Tank car
R	Tank truck
S	Pipeline
T	Other

SECTION 4: TRANSPORTATION

In developing emergency plans for communities surrounding your facility, it is important to consider transportation accidents that may involve releases of hazardous materials outside your facility site. That is why we are seeking information concerning the method and frequency of hazardous material shipments *to* your facility.

If a map depicting the transportation routes of the hazardous material is included, please check the box where indicated.

Place a check mark in the box that best describes the mode of shipment through the State of Maine. If it is other than one listed, please check "OTHER" and specify the mode of shipment.

Indicate the frequency of shipments by supplying the number and marking the time period implied. If the time periods supplied do not accurately reflect your shipment schedule, you may write in one that does. Also, if you receive the material from more than one distributor or via more than one means, please attach additional transportation sections as needed.

EXAMPLE

Your facility receives a shipment of titanium tetrachloride, by rail, once every two weeks. You would check "**RAIL CAR**" for Mode of Shipment and enter "**2**" and check "**MONTH**" for Frequency of Shipments.

**STORAGE CONDITIONS
(PRESSURE)**

CODES	Types of Pressure
1	Ambient pressure
2	Greater than ambient pressure
3	Less than ambient pressure

**STORAGE CONDITIONS
(TEMPERATURE)**

CODES	Types of Temperature
4	Ambient temperature
5	Greater than ambient temperature
6	Less than ambient temperature
7	Cryogenic conditions

STORAGE TYPES

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Enter the **maximum amount** that has ever been shipped to your facility in one shipment during the previous calendar year. This quantity should also be expressed in pounds.

Next, enter the **average quantity**, in pounds, that you receive over the course of the reporting year.

Enter the **maximum capacity**, again in pounds, contained in one single vessel or package during transport.

For Packaging Code, please refer to the Storage Type and Storage Condition codes listed on page 4 of the instructions. Indicate, using the corresponding letter and numbers, the packaging method used in the transportation of the hazardous material.

Place a check in the box of the descriptor that describes the **physical state** of the chemical **while it is in transit to your facility**.

Provide a description of the **transportation and/or rail routes** that the hazardous material travels to reach your facility. Please be specific about highways, route numbers, and street names. You may wish to consult rail and road maps in determining those routes.

Identify the transportation carrier which provides transportation for this chemical to your facility and provide their address, telephone number, emergency contact and 24 hour emergency telephone number (if different from above).

SECTION 5: CERTIFICATION

This must be completed by the owner or operator or the officially designated representative of the owner or operator. Print your full name and official title. Sign your name and enter the current date.

FOR MORE INFORMATION

For information on compliance with SARA, Title III and Maine's Public Law 464 or with questions regarding the Maine Chemical Inventory Reporting Form, contact:

Maine Emergency Management Agency
Attn: Rayna Leibowitz
72 State House Station
Augusta, Maine 04333-0072
Telephone: (207) 626-4503
1-800-452-8735

-or-

your
County Emergency Management Agency
and Local Emergency Planning Committee

NOTES: